



Lenox Library

18 Main Street
Lenox, Massachusetts 01240
(413) 637-0197 → www.lenoxlib.org

Volunteer Interest Form

Name: _____ Date: _____
 Address: _____ Phone Number: _____
 City/Town: _____ Email: _____
 Age (if under 18): _____

Please check the days & times when you can volunteer:

M__ T__ W__ T__ F__ Sa__ Su__ Mornings__ Afternoons__ Evenings__

Please check how frequently you can volunteer:

__ daily __ times/ week __ times/ month __ as needed

I am available to start on the following date: __/__/____

Please indicate areas you may be especially interested and/or experienced in working:

Main Library:

- Checking in items ____
 - Copying ____
 - Local history ____
 - Moving items ____
 - Program set-up & assistance ____
 - Shelf reading and straightening ____
 - Shelving ____
 - Weeding the collection* ____
- (*I have special expertise and would like to help the Collections Librarian with this task)

Youth Department:

- Dusting ____
- Program set-up & assistance ____
- Shelf reading and straightening ____
- Shelving ____
- Washing items using home machines ____
- Washing toys ____

Development/Fundraising with Lenox Library Association:

Assist with book sale ____

Assist with fundraising events (Please indicate your preferred time.)

Mornings ____ Afternoons ____ Evenings ____

Assist with mailings (fold, stuff, and seal envelopes, etc.) ____

Any other ways you might consider helping:

Please tell us a little about yourself:

Emergency Contact Info

Name: _____

Relationship to you: _____

Phone Number: _____

PLEASE NOTE: PROSPECTIVE VOLUNTEERS MAY BE ASKED TO SUBMIT TO A CRIMINAL OFFENSE RECORDS INVESTIGATION (CORI) REPORT, AS REQUIRED BY LIBRARY POLICY.

Please return this form to the front desk or send it to:

Volunteer Coordinator
Lenox Library
18 Main Street
Lenox, MA 01240